



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: BEN-SASSON=7

|                          |   |                     |
|--------------------------|---|---------------------|
| In re Application of:    | ) | Conf. No.: 6244     |
|                          | ) |                     |
| Shmuel BEN-SASSON        | ) | Art Unit: 1654      |
|                          | ) |                     |
| Appln. No.: 10/032,330   | ) | Examiner: J. Russel |
|                          | ) |                     |
| Filed: December 31, 2001 | ) | Washington, D.C.    |
|                          | ) |                     |
| For: TISSUE REMODELING   | ) | April 7, 2003       |

**AMENDMENT**

Honorable Commissioner for Patents  
Washington, D.C. 20231

Sir:

In response to the Office Action of March 6, 2003,  
please amend as follows:

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Shmuel BEN-SASSON

Application No.: 10/032,330

Conf. No. 6244

Filed: December 31, 2001

For: TISSUE REMODELING



Art Unit: 1654

Examiner: J. Russel

Washington, D.C.

Atty.'s Docket:

Date: April 7, 2003

THE COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

Sir:

Transmitted herewith is a [X] Amendment [ ] \_\_\_\_\_  
in the above-identified application.

[ ] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.

[XX] No additional fee is required.

[ ] The fee has been calculated as shown below:

| (Col. 1)                                  |   | (Col. 2) |                                       | (Col. 3)                   | SMALL ENTITY         |                   | OR | OTHER THAN SMALL ENTITY |                   |
|---|---|----------|---------------------------------------|----------------------------|----------------------|-------------------|----|-------------------------|-------------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |          | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA<br>EQUALS | RATE                 | ADDITIONAL<br>FEE |    | RATE                    | ADDITIONAL<br>FEE |
| TOTAL                                     | * 60                                      | MINUS    | ** 66                                 | 0                          | x 9                  | \$                |    | x 18                    | \$                |
| INDEP.                                    | * 5                                       | MINUS    | *** 5                                 | 0                          | x 42                 | \$                |    | x 84                    | \$                |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |          |                                       |                            | + 140                | \$                |    | + 280                   | \$                |
|   |   |          |                                       |                            | ADDITIONAL FEE TOTAL |                   |    | TOTAL                   |                   |
|   |   |          |                                       |                            |                      |                   |    |                         |                   |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

[XX] Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

[ ] It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

## Small Entity

## Response Filed Within

[ ] First - \$ 55.00  
[ ] Second - \$ 205.00  
[ ] Third - \$ 465.00  
[ ] Fourth - \$ 725.00

Month After Time Period Set

## Other Than Small Entity

## Response Filed Within

[ ] First - \$ 110.00  
[ ] Second - \$ 410.00  
[ ] Third - \$ 930.00  
[ ] Fourth - \$ 1450.00

Month After Time Period Set

[ ] Less fees (\$ ) already paid for \_\_\_ month(s) extension of time on \_\_\_\_\_.

[ ] Please charge my Deposit Account No. 02-4035 in the amount of \$\_\_\_\_\_.

[ ] Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$\_\_\_\_\_.

[ ] A check in the amount of \$\_\_\_\_\_ is attached (check no. ).

[XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

BROWDY AND NEIMARK, P.L.L.C.

Attorneys for Applicant(s)

By:   
Roger L. Browdy  
Registration No. 25,618

Facsimile: (202) 737-3528  
Telephone: (202) 628-5197